



UNA TAMARPECENUN PIMAUQ

YUKON KUSKOKWIM HEALTH CORPORATION

A REPORT TO THE PEOPLE

1987



Joe Lomack cutting the cake at the opening of the new YKHC offices located in the Joe Lomack Building.

(Photo by Bryon Walton)

YKHC president of the Board Joe Lomack reports:

Another year has passed and the Yukon-Kuskokwim Health Corporation continues to work hard to provide quality services to all the residents of the YK Delta. In the past year many of the board meetings have been held in the villages, in the coming year we will continue this practice. It is important to get information directly from the people as to their needs. I enjoy hearing from people, so please let me or other board members know about the problems and concerns you have.

YKHC Board of Directors and staff continue to work together to make YKHC the best it can be. There is much work to be done in the coming years to provide quality health care to all of the people in the Delta and to improve the services available to village residents. This will be accomplished as we all continue to work together.

EXECUTIVE DIRECTOR'S REPORT

As 1987 comes to a close, YKHC can look back at a very productive year. We were able to secure funds to conduct a study for the IHS, YKHC Hospital merger that may result in YKHC administering the operation of the Yukon-Kuskokwim Delta Regional Hospital. This is also the sixth year in a row that YKHC has not had any financial audit exceptions. With the State and Federal budget cuts, YKHC has still been able to expand the Mental Health and Alcohol programs, and to add the WIC - Women Infant and Children Program, to the corporation. As YKHC works to improve its programs by constantly evaluating and redefining them, we must ensure that the native people of this region have input on how and what type of health care is appropriate to improve their lives. I would like to thank all the YKHC staff for the many hours of work that has gone into developing and maintaining our programs. I would also like to thank the YKHC Board of Director's for giving the Corporation direction in establishing policy and setting goals and objectives for the coming year.

YKHC works to improve the health of all residents of the Yukon-Kuskokwim Delta

The Yukon Kuskokwim Health Corporation (YKHC) is a non-profit service organization, located in Bethel, Alaska, which serves the people of 48 regional villages. With funds provided by a number of agencies, including the State of Alaska and various branches of federal government, our mission is to:

"Achieve the greatest possible improvement in the health status of the people of the Yukon Kuskokwim Delta Region. We are committed to the development of culturally relevant programs for primary health care, prevention, and health promotion.

tion, in a setting that fosters Native self-determination in the control and management of health delivery.

Our programs of primary health care, prevention, health promotion and specialized services are supported through the efforts of 268 employees, including the services of 124 Community Health Aides and Practitioners working in 48 village operated clinics.

The Corporation's Health Care and support services which include Administration, Accounting, Finance, Special Projects Program, Human Resources and the newly formed Data Center are

based in Bethel. In addition, the Yukon Kuskokwim Health Corporation has a contract with the Public Health Service Hospital to provide medical records service. YKHC's Health Care programs are:

- * Accident and Injury Control
- * Regional Alcoholism/Drug Abuse
- * Southwest Regional Training Program
- * Community Development Program
- * Arthritis/Rehabilitation Program
- * Dental Health Care

- * Community Care Providers
- * Emergency Medical Services
- * Eye Care
- * Health Aide Services
- * Health Education
- * Maternal Child Health/Family Planning
- * Community Mental Health
- * Nutrition Improvement Program
- * Otitis Media/Special Ear Project
- * Remote Maintenance Program
- * Streptococcal Surveillance

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Supervisory instructors Martha Agnes, Bessie Lincoln and Elena Nelson confer in Health Aide Services office.

Community Liaison

The main purpose of the Community Liaison Program is to act as a "go-between" for the many federal, state, and local agencies that have an influence on village health and health programs. The original emphasis of the Community Liaison Program was to secure funding for village clinics in the Delta. This function has changed over the years, as clinic funds become more difficult to obtain, but clinic needs are still the main focus of the program.

This past year has seen improved cooperation between programs that have impact on village clinics and village health, including the Department of Community and Regional Affairs, the YKHC Health Aide Service Program, the Office of Environmental Health, and other state and federal agencies.

ARAM and SRAM are the proposed new methods for allocating funds to service units with the Indian Health Service. We have spent a great deal of

time following developments in this new methodology so that YKHC will be aware of impending changes in funding.

This year holds great challenges for the Community Liaison Program. With decreased state and federal funding, we have seen several problems emerge. First, clinics may not see badly needed increases in clinic lease amounts. Coupled with cuts in state revenues, it will be more important than ever for clinics to carefully budget their dollars.

The cuts in state revenues will have an impact on several other programs as well. Already mentioned were the Public Health programs. Additional cuts may mean fewer Village Safe Water projects. It will be very important for villages to carefully maintain and service their water and sewer systems this next year, as emergency funding will be more difficult to find in case of breakdowns.

Community Development Program

The Community Development Program is a newly formed position in YKHC. It is funded by Federal grant under the Anti-Drug monies. The main goal is to implement a holistic approach in prevention and ownership. This approach will be family centered and will involve communities in planning, development and implementation of programs suited in their

needs. The Coordinator will work closely with Village Volunteer Alcohol Board members, the VAECs and the Community Youth Advocates. There are three Community Youth Advocates recently hired, Arthur Alexie from Kwethluk, Daniel Lincoln from Tununak, and Teddy Hamilton of Emmonak, and all three will be supervised by the Coordinator.

Medical Records

Medical Records Department of the Public Health Service Hospital is staffed by employees of the Yukon-Kuskokwim Health Corporation. They are supervised by an employee of Indian Health Service who is the medical record librarian. The Department is open seven days a week for 16 hours a day. There are 13 employees, and they not only serve the public, but the medical staff, nursing staff and all ancillary services.

Their functions include: making available the medical records for continuity of patient care; preparation of birth certificates, death certificates, statistical reports for planning and budgeting of hospital services; assistance to all professionals in documentation of patient care; insuring the confidentiality of patient information; responding to requests for patient information while insuring patient's authorization has been obtained; and handling admission procedure when patients must stay in the hospital for treatment.

The Medical Record Department makes available approximately 500 individual medical records each day for all the departments and are responsible for filing reports. These individuals are dedicated to responding to patient needs.

Currently the department functions strictly on a manual basis, but it soon will become computerized in many functional areas.

Human Resources Development

The Personnel Office of the Human Resource Department has developed, implemented and managed a full range of services over the last year which assist management and staff in addressing personnel issues.

Some of the services provided include: recruiting, screening, selection, processing, orientation, probationary and periodic performance evaluations, counseling, discipline, recognition, and termination procedures. The staff provides assistance to employees in understanding the compensation and benefit programs. They also provide technical assistance in management of Employee Personnel Policies and Procedures.

As part of the Human Resources Department, the Employee Development Program assists employees in maximizing their potential. This is accomplished by providing career counseling and guidance, employee assistance, employee education and training opportunities.

Of special significance is the program's goal to foster Native self-determination through

control and management of the health delivery service. In response to the Board of Director's mandate that Native employees take on greater responsibility within YKHC, the program initiated the "Ciullistekiat Project." This project is geared toward assisting and supporting YKHC Native employees to prepare for future leadership roles within the Corporation.

In addition, the Employee Development Program works to meet the continuing education needs of the Community Health Aides through the "Bridging Program." This Program helps Community Health Aides expand their academic skills and to prepare to enter and complete a program of higher medical education.

The Employee Development Program makes available education and training opportunities to all employees to develop and enhance their professional skills and personal potential. The program staff also provides voluntary and confidential counseling services to employees and their families with personal or health related problems that have impact on their performance.

Finance Department

The Finance Department, which includes the Payroll process for over 200 YKHC employees including the Village Health Aides and other village outreach workers, purchasing of supplies and equipment, transportation function for personnel and supplies, was responsible for receipt of over \$8 million dollars during fiscal year 1987, including contracts from the Indian Health Service, State of Alaska Health and Social Service, other State of Alaska grants and revenue produced by YKHC service departments such as Dental and Eye Services. All office supplies, furniture and property are the responsibility

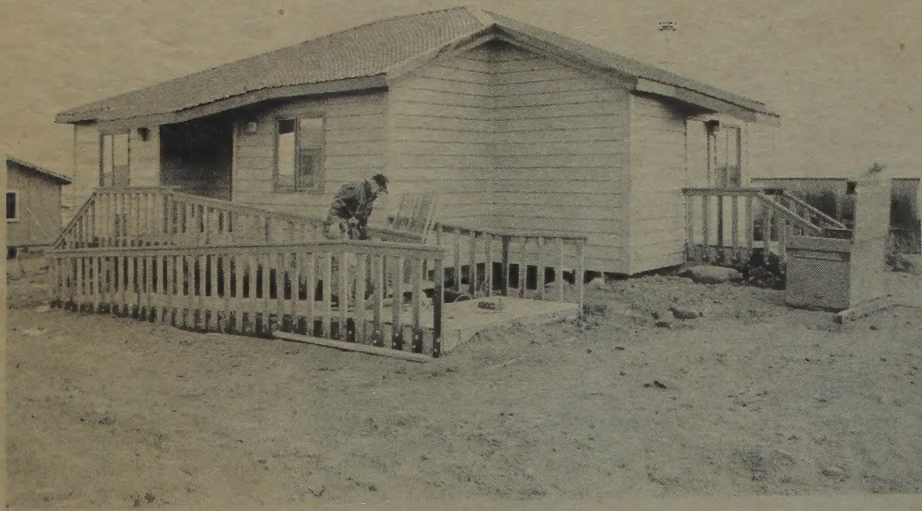
of the department as in the maintenance of the corporate vehicles and maintenance of the YKHC rental properties.

The Computer Service Department started a pilot project of a Computer Data Center which provides computer services to all departments. The departments submit requests of work to the computer department and the trained data input clerks produce a finished product the same day thus reducing clerical work throughout the corporation and maximizing use of the computers. More workable computer programs have been initialized and used throughout the corporation.

Remote Maintenance Worker Program

This program is currently in its sixth year of existence and provides training and technical assistance to water and sewer plant operators at ten Lower Yukon villages by a worker based at St. Mary's. In assisting local

residents to better maintain their water and sewer systems, the Remote Maintenance Worker helps to ensure the continued availability of safe water, promoting better health among village residents.



Workmen put the finishing touches on the handicap access ramp at the new Health Aide Clinic in Scammon Bay.

Community Health Aide Program offers wide range of services to delta residents

The Community Health Aide Program (CHAP) is the foundation of all health care in the Yukon-Kuskokwim Delta. Scattered over 75,000 square miles are 48 village clinics which serve the health needs of 17,000 people. The Yukon-Kuskokwim Health Corporation employs 120 Community Health Aides who maintain regular clinic hours, five days a week and provide on-call coverage for special problems or emergencies that arise 24 hours a day, seven days a week. During 1987, the Community Health Aides handled 76,333 patient visits.

The village-based Community Health Aides (CHA) provide acute, inter-ventive care, emergency medical and trauma care, preventive health services, and chronic care. In addition, they work closely with many

health care providers including physicians, public health nurses, the Maternal Child Health Program and others to insure Delta residents access to quality medical care.

Training and field supervision are crucial for insuring the delivery of quality health care on the village level. Health Aide Training (HAT - Kuskokwim College) and Health Aide Services (HAS - Yukon-Kuskokwim Corporation) work together under the direction of YKHC's CHAP Director to ensure that CHAs receive training and support they need in their work.

Health Aide Training provides CHAs with a wide range of skills. This includes basic skills taught to newly-hired, untrained health aides, through the advanced skills required for state certification, training in specialty areas, and re-

resher courses. This training is reinforced in the village through the Supervisor-Instructors (SIs) of HAS.

The Supervisor-Instructor Program is an important component of the Community Health Aide Program. Besides reinforcing curriculum taught by HAS, the SIs provide quality assurance and provide direct supervision and support to the CHAs through regular field trips and frequent telephone contacts. SIs made 135 village trips during 1987. They are key members of the village health team consisting of the Physician, Public Health Nurse, Health Aide, and Supervisor Instructor. Through the SI Program, the health aides receive supervision, guidance, and the support they need to insure the delivery of quality health care in the villages.

Regional Alcohol and Drug Abuse Program gives assistance, education to villages

The Regional Alcohol and Drug Abuse Program provides technical support and assistance to the Village Alcohol Education Counselors (VAEC). Twelve village-based alcohol counselors travel to nearby villages in their home areas to conduct presentations on alcoholism and drug abuse and provide counseling services to village residents.

The philosophy of the program is to provide a range of substance abuse outpatient and educational services through

the use of village-based counselors and culturally relevant techniques and materials. Emphasis in the program is placed on prevention/education activities, primarily, and individual and group counseling. The Regional Alcohol and Drug Abuse staff provides direction, supervision, monitoring of client files, support and in-service training to the Village Alcoholism Education Counselors. The staff continues to coordinate services to clients through the Phillips Alcoholism Treatment Center,

Bethel Alcohol Safety Action Program, Indian Health Service and local and regional agencies to improve the quality of service and assure continuity of care.

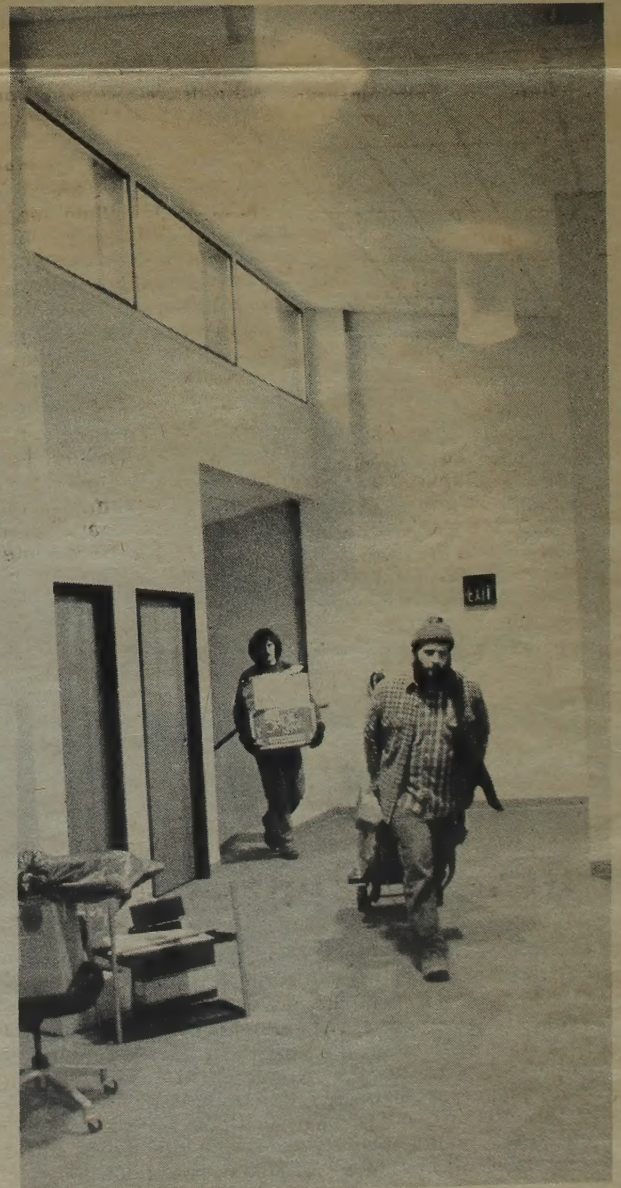
The Regional Alcohol and Drug Abuse staff work in cooperation with the Southwest Regional Trainer to provide culturally relevant continuing education to VAECs and to provide technical assistance and support to the volunteer boards and Traditional Elder Counselors.

Southwest Regional Training Program trains counselors for treatment and prevention of substance abuse

Since 1986, SWRTP has assisted 17 village alcohol boards to develop and have trained 139 volunteers in community development strategies, networking with other alcohol boards and with ongoing continuing education courses in alcohol and drug abuse.

The program's objectives are to bring knowledge and understanding of the Yup'ik spirit using traditional counselors and village elders who assist with substance abuse training and counseling. With the elder's knowledge of the Yup'ik values, they have been very instrumental in providing a balance between the "western" approach to healing and the traditional healing. SWRTP's goal is to aid in the

reduction of alcoholism and drug abuse through the development and maintenance of a manpower pool skilled in substance abuse treatment and prevention. Using the elder's guidance and coordinating with the Regional Alcoholism and Drug Abuse program, the SWRTP has developed and implemented a culturally relevant training curricula. The elder's wisdom and knowledge has been invaluable, essential and effective in helping people with substance abuse problems, and in expanding the training of our Village Counselors to include traditional counseling methods. The program provides the region with both traditional and western components.



D & G delivery men helped the moving process last December 6, when the offices of Y.K.H.C. moved to Fl. & Main streets in the Joe Lomack Building.



Man gets tested for Diabetes at Holy Cross Health Fair while his daughter looks on.

(Photo by Byron Walton)

Translator Interpreter Program provides vital link between doctor and patient

In 1987, the Translator continued to provide a valuable language and cultural bridging service at the hospital. The Translator has become an integral part of the inpatient health care team, participating in morning patient rounds, providing translation for patients and their families, doctors and nurses following rounds, and giving support to patients separated from their families and friends by their hospitalization.

In the outpatient department, the translator helped unravel the mysteries of special procedures for patients so they could understand what the test involved and why it was needed. When visiting specialists held clinics in Bethel, the translator was usually there to interpret the nature of the patient's illness, what types of tests they might need, and what their care would consist of. Nursing Aides in the outpatient department also had the services of the translator at their disposal for consultation on difficult interpretation problems.

As a member of the Hospital Patient Advocacy Committee, the translator helped to ensure that patients understood their health conditions, treatments, and how the hospital system works.

Perhaps the most important function of the translator occurred unpredictably, usually at odd hours. The translator was on call 24 hours a day, 7 days a week for crisis. When tragedy struck, or when a family faced the immediate loss of a loved one, when difficult and sad words had to be passed from the caregivers at the hospital to the family of a patient, the translator was called.

Over the past 2 years, the Translator has become a vital element of patient care at the hospital. We enter the new year hoping to expand the reach of the translator, who will make audio tapes that explain diseases, tests and treatments to patients. We at YKHC welcome suggestions from anyone for topics for these tapes. Please address them to the YKHC Medical Director, or to the Translator/Interpreter.

Nutrition Improvement Project identifies diet problems, seeks solutions

The special Nutrition Improvement Project, to improve the diet of teenagers in 10 YK Delta villages, has been completed. The results show that diets have improved significantly in villages that we have served, but iron deficiency is still a problem, and we will continue to work to educate teens and other children about the importance of nutrition for their health. With the completion of this special project, nutrition staff have expanded their

educational services to include all villages and all age groups. School presentations on nutrition and native foods, cooks workshops and consultation to other community agencies continues. Our work on the development of educational materials for traditional foods is continuing, with greater demand for copies from YK Delta villages and from other regions in the state. The emphasis of our work continues to revolve around improving

eating habits in our young people.

We are participating in an adult dietary survey being conducted by the Alaska Area Office of the Indian Health Survey. The purpose of this survey is to determine current eating habits of Alaska Native adults in order to plan appropriate programs for health promotion and disease prevention.

Beginning in July, the Special Supplemental Food Program for Women, Infants and Children moved to YKHC. Clinics

and nutrition education for WIC clients are beginning in villages as our WIC staff continues to expand outreach and education services. Village-based Nutrition Aides are devoting their time to expand WIC services and to seek out women and children in greatest need for supplemental foods and nutrition education. Nutrition Aides continue to receive training in nutrition in order to provide this needed service in their villages.

Community Care Providers Program coordinates follow-up treatment

As the YKHC Community Care Providers, we are often the first to be contacted when there is a need to make a home visit or deal with a patient who is unable to get to the hospital. We provide health education, medical care and support to people with chronic care needs, such as hypertension and heart related problems. We work closely with Public Health Nurses, to review patient loads and follow-up sexually transmitted diseases. The program also

serves the Senior Citizens at the Senior Center by routinely taking blood pressures and weight, assisting with medical transportation, interpretation, and being a support system to the families. We also work on special projects such as Nutrition, Aids Task Force, and the Hepatitis B project. We look forward to continuing to provide services in or around the community, to promote good health care and to increase education to the public.

Health Education assists area residents in making healthy choices for their lives

Knowledge of healthy lifestyle choices can prevent a great deal of illness, suffering and even premature death. The YKHC Health Education program acts as a resource for schools, community groups, the YKDR Hospital, and the corporation's programs by providing assistance to these organizations in the development of educational and informational materials, and programs to provide health promotion and disease prevention throughout the Delta. In addition, the Health Education program maintains

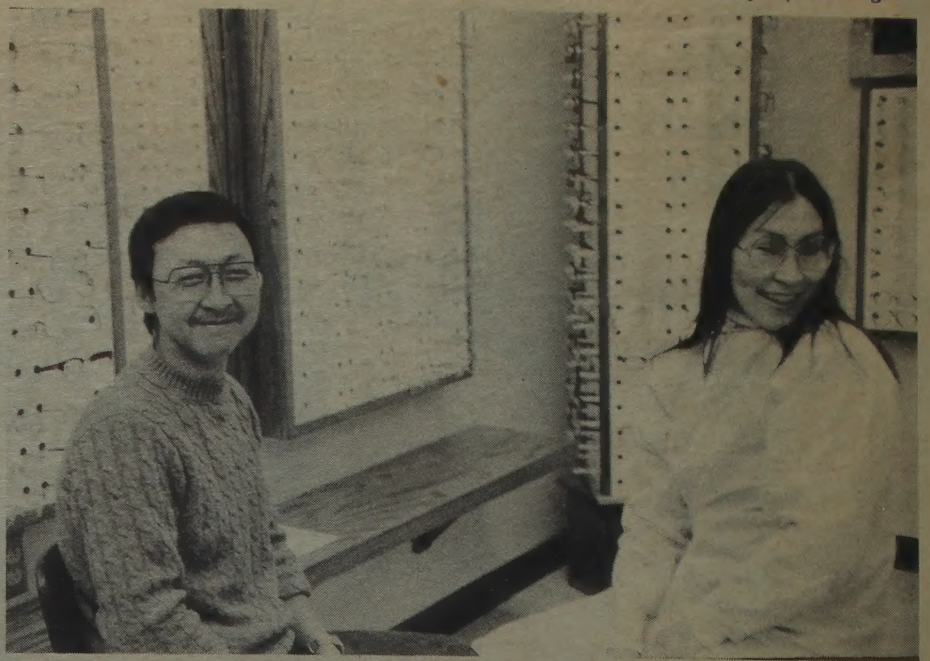
a resource lending library of printed educational materials and audiovisual aids.

The Health Education Program continues to work for health promotion and disease prevention through community health fairs, publication of a bimonthly health education newsletter, working with local media and assisting Community Health Aides and Village Alcohol Educational Counselors to increase awareness of the benefits of good health practices within their villages.

Arthritis/ Rehabilitative Program

What is arthritis? Arthritis is a very painful inflammation of the joints. It restricts the body's ability to move easily and affects its range of motion. The Yukon-Kuskokwim Health Corporation offers a special program to help people with strokes, arthritis, or other debilitating disease. The funding for this program is very small and the services are coordinated between the Alaska Treatment Center, the hospital and YKHC. The Occupational Therapist provides education and

instruction to patients in personal care and treatment, teaches special rehabilitative exercises and provides patients and their families with information and special aids for daily living to improve the quality of life. In 1987, the program was able to assist 17 patients by providing one specialty clinic in Bethel. The goal in 1988, is to identify and obtain additional sources of funding in order to continue to provide this special service and to expand it if possible.



Willie Lake and Marilyn Johnson working at the Optical Shop of the hospital.

Mental Health Program interacts with many agencies, provides care

The Community Mental Health Center provides individual and family counseling services to any resident of the Delta communities. We travel to 36 outlying villages to provide counseling and to follow-up patients in an effort to make mental health services more readily available and to minimize costly travel into Bethel.

Our Community Mental Health Center consults with and receives referrals from numerous agencies in Bethel, such as: The Yukon-Kuskokwim Delta Regional Hospital, The Division of Family and Youth Services, and Phillips Alcohol Treatment Center.

Our Community Sup-

port Program started at the end of 1985 and provides a wide range of services for people with long-term mental disabilities. The Community Support Program makes home visits and works with the client's entire family to solve problems and meet patient needs.

We also provide educational services for Bethel agencies and outlying villages to promote better mental health.

The Community Mental Health Center has relocated from PHS Hospital and now occupies more spacious quarters at the BNC Business Complex in Bethel. Our new offices are centrally located and are more easily accessible to the community.



Mary Gregory helps inform Delta residents about proper nutrition.

Eye Department performs care, screening for delta residents

The YKHC Eye clinic provided care to approximately 4,300 patients in FY'87. This includes those examined in Bethel and in 29 area villages visited during the year. The Eye Clinic staff includes 2 optometrists and 3 1/2 assistants.

In this region, the primary causes of decreased vision are macular degeneration, corneal

scarring, glaucoma, cataracts, and amblyopia (dimness of vision). Glasses and contact lenses are prescribed for those with routine refractive problems such as nearsightedness, farsightedness or astigmatism. In the majority of cases, the loss or decrease of eye sight is preventable through timely and proper diagnosis and treatment.

Vision care is available to all Delta residents. Non-natives are charged a fee for service. Glasses and contact lenses are provided for those who need them at a reasonable cost. Care for those with medical eye problems is coordinated with the Ophthalmology Department at ANMC or with private sector physicians as indicated.

Maternal Child Health/Family Planning offers education referral and exams testing

The Maternal Child Health/Family Planning Program strives to improve the health of our region's people by providing comprehensive prenatal and family planning examinations, education, counseling, and referral services.

The Maternal Child Health portion of the program is responsible for the identification of prenatal women early in their pregnancy, development of an action plan to provide each individual with optimal care, monitoring the plan to insure that it is implemented, follow-up care for women after delivery, and the monitoring of the infants for routine health surveillance exams and immunizations for the first year of life. Cooperation between the Yukon-Kuskokwim Delta Regional Hospital, the Bethel Family Clinic, the State Public Health Nurses, the Haemophilus Influenzae B nurses, and the Community Health Aides, is vital to the efficiency of this system.

The Family Planning section of the Program concentrates on provid-

ing a full range of high quality family planning services. Field clinics are held by the nurse practitioners to provide these services in the villages as well as at the clinic in the Bethel hospital.

The staff maintains registries for Pap Smear, Hepatitis B, Molar Pregnancy, and Abnormal Lab Results. They provide follow-up treatment and procedures to clients needing those services.

Both the Maternal Child Health and the Family

Planning components of the program emphasize available educational and counseling services. The Health Educator coordinates presentations at the Bethel Prematernal Home, the Yukon-Kuskokwim Correctional Center, the Yukon-Kuskokwim Delta Regional Hospital, the Bethel Teen Center, the Tundra Women's Coalition, as well as at schools and community functions in Bethel and the surrounding villages. Presentations encourage communication within the family. Educational topics in-

clude: basic anatomy and physiology, child sexual abuse, puberty, pregnancy, fetal development, sexual decision-making, family planning, parenting, menopause, and infertility.

An advisory committee of community and village members review and evaluate all educational materials used in the program. The Teen Outreach Worker provides a support and referral resource for Delta teens. The goal is to improve the reproductive health of teenagers by ensuring greater access to health educational and clinical services. The Male Involvement Project utilizes male volunteers from the community as counselors and co-instructor with the program staff.

The availability of these services allows the Maternal Child Health/Family Planning program to become partners with the people in striving for improved health for everyone in the Yukon-Kuskokwim Delta.

Hepatitis B Program identified 600 carriers of Hepatitis in Y-K Delta

There has been a Hepatitis B Program in the Yukon-Kuskokwim Delta since the fall of 1981. Initial activities were conducted by the Center for Disease Control to identify the level of disease in the Delta and to pilot the use of the new Hepatitis B vaccine. In March of 1983, the State of Alaska funded the Hepatitis B Program to continue the screening and immunization efforts begun by the CDC. As a result of this intensive effort, over 600 Hepatitis B "carriers" were identified. Our Hepatitis B Carrier Program was developed to provide the necessary medical follow-up which the Hepatitis B carrier population requires.

There are about 650 "carriers" of Hepatitis B in the Y-K Delta. These people must have their blood tested every 6 months. Two blood tests samples are done. The first is to see if they still have active Hepatitis B infection. Most carriers feel healthy and don't look sick, so this is the only way to check if the bodies have begun to make protection against the Hepatitis B virus. The second test is to see how healthy the liver is. People who carry the Hepatitis B virus for a long time can develop liver cancer. This blood test can show possible liver cancer in early stages, so treatment can be started and has a better chance of being successful.

In addition to the follow-up of all carriers within the Y-K Delta, we are active in providing follow-up for the babies born to mothers with Hepatitis B during their pregnancy. Because most of these babies will be infected with Hepatitis B, it is necessary to first provide immediate protection at birth and then ongoing protection through the use of the Hepatitis B vaccine series. Since it takes longer to make sure that these babies have received enough protection, these babies need to be tested to make sure they are protected from Hepatitis B.



Brenda Lewis and David Verlinich at work in the Dental Clinic.

Dental Department aims to increase dental services

The Yukon Kuskokwim Health Corporation's Dental Department was very busy this last year. The dentist portion of the staff was twenty five per cent under staffed. This was the result of recruiting difficulties - finding sensitive, well qualified new staff to fill vacant positions. To the Dental Department's credit, remaining staff provided ninety two per cent of the

amount of services it had previously offered when fully staffed the preceding year. The net result was that oral health consumers were minimally impacted by significant Dental Department staffing shortfalls.

As described above, health consumers in the Y-K region should be alerted to the present difficulties in recruiting well qualified profession-

al staff. The health consumer public likewise should remain aware that when staffing shortfalls exist, some service reduction will occur. Furthermore, the staffing shortfalls tax remaining staff to provide necessary services. The Dental Department wants the public to know it appreciated the public's understanding this past year.

The Dental Department is now fully staffed after a

year of exhausting recruitment. The Department has three new dentists and a new dental hygienist. This department now looks forward to an even busier year than last. The department remains ever more strongly committed to people's improved oral health and finally, the Dental Department wishes to acknowledge our patients as the best anywhere.

Streptococcal Surveillance keeps 'strep belt' tightened

The goal of the Streptococcal Surveillance Program is to maintain the low incidence of acute rheumatic fever in the Yukon-Kuskokwim Delta region. Prevention of acute rheumatic fever is achieved by early detection and treatment of group A, streptococcal pharyngitis or strep throat.

This year we have progressed in our efforts to improve our system. We began computerizing our patient record system to provide more efficient storage and to retrieve information and to allow rapid analysis of patient data for epidemiologic review. Through a cooperative effort of several YKHC programs, the Strep Program initiated a pilot study to determine the feasibility of training Community Health Aides to perform a rapid strep

test in their village clinics. Village-based strep testing would greatly improve direct health care of strep throat. Until the pilot study is complete, the strep lab has instituted a follow-up system for treatment information and this measure has helped reduce the number of missed treatments for strep throat.

We are pleased to report that the Streptococcal Surveillance Program laboratory has been awarded a two year accreditation by the Commission on Laboratory Accreditation of the College of American Pathologists based on the results of an on-site inspection. This accreditation satisfies the requirements of the Joint Commission on Hospitals which fulfills our obligation to the hospital and verifies the high quality of

service we provide to patients and medical personnel.

Strep throat continues to be a major health problem among the people of the Yukon-Kuskokwim Delta region. The strep lab processed approximately 24,000 throat swabs in 1987 with a 19 percent positive rate.

With this high rate of strep throat, the risk of acute rheumatic fever continues at a high level as well. The Streptococcal Surveillance Program is constantly working to improve our system and provide better protection against acute rheumatic fever.

STREP continues to be a problem in the Yukon-Kuskokwim Delta.

If you have a sore throat have a throat culture taken.

Emergency Medical Services dedicated to best possible care

When sudden illness or injury occurs in our communities, the problems caused by time, distance and the availability of transportation must be overcome to ensure good emergency care. The people in the villages are often the first to respond in an emergency situation. For this reason the EMS program is dedicated to providing a comprehensive emergency medical services system throughout the Delta. A major part of the system is to ensure that local people as well as professional people receive the training necessary to perform life saving skills in an emergency situation. Therefore, to provide continuing emergency medical training and public education are two major goals of this program.

First Aid and Cardio-pulmonary Resuscitation (CPR) are two of the basic courses taught by the

Emergency Medical Services staff. In 1987, classes were taught in 16 villages and Bethel reached hundreds of students from grades 6 - 12.

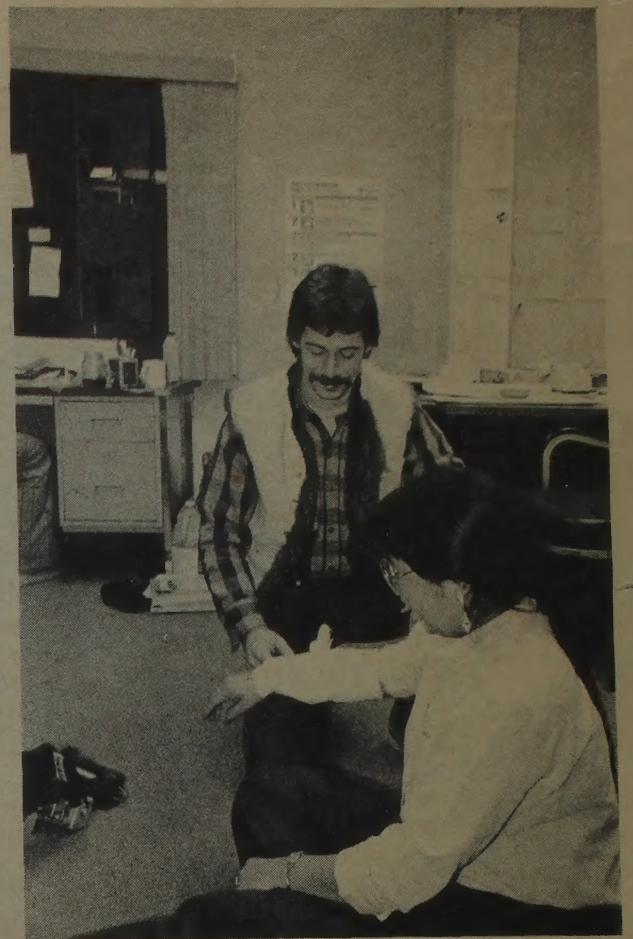
During the past year, the program has completed its third book in the safety and first aid curriculum series. Basic Emergency Aid Rescue Students, "BEARS" is designed to teach 3rd and 4th grade students about first aid and personal safety. A first place award was presented to Corlis Taylor, Program Director at the International Congress on Circumpolar Health, for her poster presentation of the first aid and safety education program.

In addition to teaching basic first aid and CPR classes, the staff conducts Emergency Trauma Training (ETT) courses. The course is designed to teach people how to re-

spond appropriately in an emergency situation, such as a three-wheeler accident with severe head and neck injuries, and possible broken bones.

In 1987, 40 Community Health Aides received training as Emergency Trauma Technicians and Emergency Medical Technicians. The program has helped to improve skills of our Community Health Aides and provide the best care possible to patients living in rural villages. Emergency Medical Technicians receive 110 hours of training and are able to use specialized equipment to treat the more serious trauma.

In addition, in 1987 the staff provided training opportunities for PHS hospital staff and National Guard personnel. The staff of the Emergency Medical Services Department looks forward to another productive year in '88.



Tim Heaken and Katie Vincent practice first aid techniques.

Accident and Injury Control Program provides guidelines for accident prevention

Injuries dominate the statistics as the leading cause of death and hospitalizations in the region. According to Alaska Native Health Statistics from 1982-1984 there were 133 deaths due to injuries. In addition, from FY84 to FY86 there were 14,666 outpatient visits and 828 hospital admissions all for injuries received from accidents.

The Accident and Injury Control Program was established in response to the high incidences of mortality directly attributed to accidental injuries. The goal of the Accident and Injury Control staff has been to develop and to implement public information and education courses to increase pub-

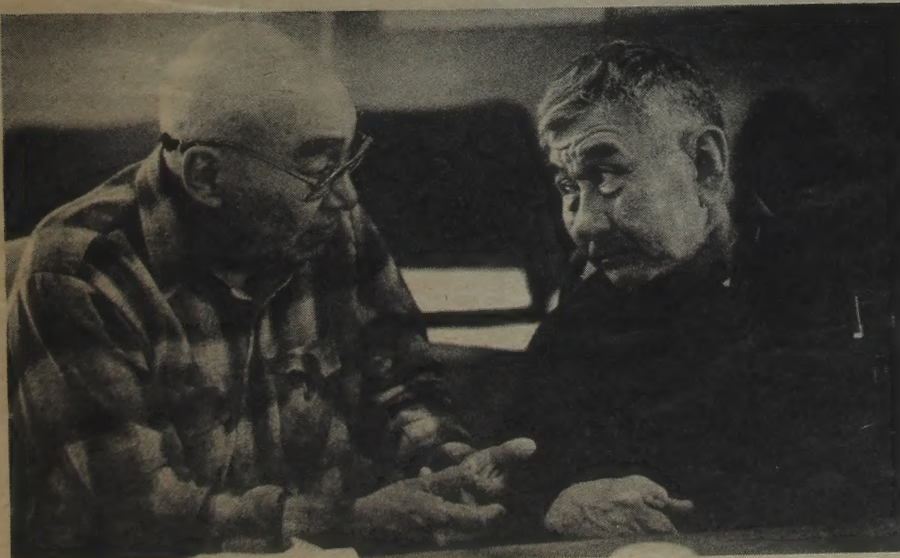
lic awareness and to help reduce the frequency of accidental deaths and injuries in the YK-Delta.

Each year the Accident and Injury Control Staff travel to selected villages throughout the Delta to conduct Injury Prevention courses. The course topics include Hunter Safety, Fire and Burn Prevention, Emergency Survival, Poison Prevention, ATV (All-Terrain Vehicle) Safety and Cold Water and Ice Safety. Additionally, the staff maintains a vigorous on-going public awareness campaign through the local radio station, KYUK. This program, featuring sixty second safety tips, is called "Staying Alive", and is aired three times each day and five days per week. The Yup'ik

version, aired four times each week has been expanded and is now aired seven days per week.

In 1987 the Accident and Injury Control program taught 44 classes to 1483 students in Bethel and Delta villages. A total of 28 village trips were made by program staff. A special emphasis in 1987 was to further develop materials for classroom use and the distribution of safety equipment such as smoke detectors and child safety devices (shock stoppers, cabinet locks).

In FY'88, we look forward to working with area villages in developing safety regulations and the implementation of injury surveillance.



Joe Lomack, left, of Aklachak, chairman of Y.K.H.C. board of directors confers with Paul John (right) of Toksook Bay.

(Photo by Jim Barker)

Otitis Media Program tests ear problems

This unique project started in 1978 in recognition of chronic ear disease in the Yukon-Kuskokwim Delta. It has been funded by the State through the Yukon-Kuskokwim Health Corporation. The project has two goals: (1) To reduce ear disease in the Yukon-Kuskokwim Delta and (2) to improve Health Aide diagnoses, treatments and follow up on ear disease.

Currently the project is staffed with two Otolaryngology Specialists and one Department Assistant. The two ear specialists travel to approximately 4 villages each month from September through May and conduct ear examinations, tympanograms and hearing tests and makes referrals as needed to Ear, Nose, and Throat Specialty clinics or for ear surgeries. This year 30 villages with higher incidence of ear problems of higher populations are prioritized for travel. Ap-

proximately 1800 patients will have been seen with 300-500 referrals for further medical attention. This year, from June '87 through June '88, six Ear, Nose, and Throat Specialty and 5 myringotomy and tube surgery clinics are scheduled in Bethel. The project staff assists with each of these clinics to improve their skills inclusive to their work. The otologists also work and train the Health Aides individually in villages during travel. The project also conducts its own Advanced Ear Workshop annually. This year in October, 8 village Health Aides with 2 supervisor instructors from Health Aide Services participated. Another Advanced Ear Workshop is planned in April '88 for ten village Health Aides. The project otologist also conduct community education when requested by schools and other agencies on prevention of otitis media.

LISTEN TO YKHC's

**STAYING ALIVE
ON
KYUK Radio**

Aired Twice A Day in Yup'ik & English



Award winners at YKHC Annual Award Banquet, January 14, 1988.

1987 awards presented at Annual Awards Banquet

The Annual Awards Banquet was held on Wednesday evening, January 14, 1988 in Bethel. Congratulations of all the winners!

Employee of the Year
Eula David
Supervisor of the Year
Maureen Thiele
Board Member of the Year
Joe Lomack

Executive Director's Commendation
Patrick J. McCree
Hero's Award
Maggie Smith

National Indian Health Board Winners: Norma Shorty, Jesse Gunlik and Joe Lomack.
Special recognitions

were made to KYUK for the "Staying Alive Program" and to Mary Wilda/Warner for her eleven years of service to YKHC.

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